| A       |  |  |  |  |  |
|---------|--|--|--|--|--|
| 200     |  |  |  |  |  |
| 02/01/0 |  |  |  |  |  |
|         |  |  |  |  |  |

Please type a plus sign (+) inside this box 

+ Approved for use through 09/30/2000. OMB 0651-00320

Patent and Trademark Office: U.S. DEPARTMENT OF COMMERCE

Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control number.

## UTILITY PATENT APPLICATION **TRANSMITTAL**

Attorney Docket No. **WELL0027** First Inventor or Application Identifier | Magruder et al. Home Asset Management Account

| Only for new n  | nonprovisio  | onal applications under                          | 37 C.F R. §   | 1.53(b)) Expr   | ess Ma  | il Labe                             | el No.   | EL5408  | 387653US   | · · · · · · · · · · · · · · · · · · ·  |                               |
|---|--|--|---|---|---|-------------------------------------|--|---|--|--|-------------------------------|
|   |  | TION ELEMENT                                     |   | contents.   |   | ADD                                 | RESS   | <i>TO:</i> <b>E</b>   | Assistant Co<br>Box Patent A<br>Vashington   |  | ts                            |
| 1. X (Su<br>2. X Sp<br>(pre<br>- D<br>- C<br>- S<br>- R<br>- B<br>- B   | ree Trans ubmit an or recificatio referred arr rescriptive cross Reference reference reference reference reference reference reference | mittal Form (e.g., a riginal and a duplicate     | PTO/SB/17/for fee process [Total Pages low) on Applications onsored R & ndix  | 90 ]  | 7.  | Nucle<br>( <i>if ap</i><br>a.<br>b. | eotide a plicable  ACCOM  Assign  37 C.F         | nd/or A a, all nec Compu Paper Statem MPAN ment Pa a.R.§3.7 | mputer Pro<br>mino Acid S<br>cessary)<br>uter Readat<br>Copy (iden-<br>ment verifyin<br>/ING APP<br>apers (cove<br>3(b) Staten | gram (Appendix) Sequence Submission ple Copy tical to computer coping identity of above continuation purchased to the continuation of the continua | y)<br>opies                   |
| 4. Oath or Declaration  a. X Newly executed (original or copy)  b. Copy from a prior application (37 C.F.R. § 1.63(d)) (for continuation/divisional with Box 16 completed)  i. DELETION OF INVENTOR(S) Signed statement attached deleting inventor(s) named in the prior application, |  |  |   | (d))<br>13.<br>, 14.<br>, 15.                                   | 9. English Translation Document (if applicable) 10. Information Disclosure Copies of IDS Statement (IDS)/PTO-1449 Citations 11. Preliminary Amendment 12. X Return Receipt Postcard (MPEP 503) (Should be specifically itemized) 13. Statement(s) Statement filed in prior application, Statement(s) (PTO/SB/09-12) Status still proper and desired 14. Certified Copy of Priority Document(s) (if foreign priority is claimed) |                                     |  |   |  |  |                               |
| Prior app<br>For CONTINU<br>under Box 4b<br>reference. Th   | ontinuation plication in JATION or p, is consi ne incorpo  | Divisional formation: Examine DIVISIONAL APPS of | Continuor Indigent Continuor In | ation-in-part (Cre disclosure he accompanien a portion RESPONDE | of the p<br>ying co<br>has bee  | orior ap<br>ntinua<br>en inad       | prior ap<br>oplication<br>tion or di<br>vertenti | plication Group / / n, from livisiona y omitte  or          | No Art Unit.  Which an oail application d from the s  Corn   | a preliminary amendment.  Ith or declaration is sumand is hereby incorps submitted application prespondence address before a prespondence address a prespondence ad | pplied<br>orated by<br>parts. |
|   | <u> </u>   |  |   | elephone  |   | <del>-</del>                        |  |   | Fax  |  | <del>_</del>                  |
| Name (P<br>Signature  |  | Michael A. Glenr                                 | Cy Cy   |   |   | Regis                               | stration N                                       | lo. (Attorn   | pey/Agent)  Date   | 30,176<br>2/7/02   | ]                             |

Burden Hour Statement. This form is estimated to take 0.2 hours to complete. Time will vary depending upon the needs of the individual case. Any comments on the amount of time you are required to complete this form should be sent to the Chief Information Officer, Patent and Trademark Office, Washington, DC 20231 DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO. Assistant Commissioner for Patents, Box Patent Application, Washington, DC 20231.

PTO/SB/17 (6/99)

Approved for use through 09/30/2000. OMB 0651-0032

Patent and Trademark Office. U.S. DEPARTMENT OF COMMERCE

Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control number

| <b>FEE TRANS</b>  | ΜΙΤΤΔΙ          | Complete if Known    |                 |  |  |  |
|---|-----------------|----------------------|-----------------|--|--|--|
|   |                 | Application Number   | Unassigned      |  |  |  |
| for FY 1  | 999             | Filing Date          | Herewith        |  |  |  |
| Patent fees are subject to a  | nnual revision. | First Named Inventor | Magruder et al. |  |  |  |
| Small Entity payments must be supported<br>otherwise large entity fees must be paid |                 | Examiner Name        | Unassigned      |  |  |  |
| See 37 C.F.R. §§ 1.27   |                 | Group / Art Unit     | Unassigned      |  |  |  |
| TOTAL AMOUNT OF PAYMENT   | (\$) 1,506.00   | Attorney Docket No.  | WELL0027        |  |  |  |
|   |                 | TEE O                | ALCIN ATION (t  |  |  |  |

| TOTAL AMOUNT OF PATMIENT (\$) 1,500.00   | Attorney Docket No. VVELLUC                                 |  |  |  |  |  |
|--|---|--|--|--|--|--|
| METHOD OF PAYMENT (check one)  | FEE CALCULATION   | ON (continued)                                 |  |  |  |  |
| 1. X The Commissioner is hereby authorized to charge indicated fees and credit any over payments to:     | ADDITIONAL FEES   |  |  |  |  |  |
| indicated fees and credit any over payments to:  | ge Entity Small Entity<br>e Fee Fee Fee Faa Day             | scription Fee Paid                             |  |  |  |  |
| Deposit<br>Account 07-1445   | ode (\$) Code (\$)  | · — 1  |  |  |  |  |
| Number   | 5 130 205 65 Surcharge - late filin                         | ·  |  |  |  |  |
| Deposit  | 7 50 227 25 Surcharge - late pro-<br>cover sheet.           | visional filing fee or                         |  |  |  |  |
| Account Name Glenn Patent Group  |   | cation   |  |  |  |  |
| Charge Any Additional Fee Required   |   |  |  |  |  |  |
| Under 37 CFR §§ 1.16 and 1.17  | 7   | ·  |  |  |  |  |
| 2. Payment Enclosed:   | Examiner action   |  |  |  |  |  |
| Check Money Other  | 13 1,840* 113 1,840* Requesting publicat<br>Examiner action | uon of SIR after                               |  |  |  |  |
| FEE CALCULATION  | 15 110 215 55 Extension for reply                           | <b>├</b>                                       |  |  |  |  |
|  | 10 300 210 190  | within second month                            |  |  |  |  |
| 1. BASIC FILING FEE Large Entity Small Entity  | 17 870 217 435 Extension for reply                          | within third month                             |  |  |  |  |
| Fee Fee Fee Fee Description  | 18 1,360 218 680 Extension for reply                        | within fourth month                            |  |  |  |  |
| Code (\$) Code (\$) Fee Paid   | 28 1,850 228 925 Extension for reply                        | within fifth month                             |  |  |  |  |
| 101 760 201 380 Utility filing fee 740.00  | 19 300 219 150 Notice of Appeal                             |  |  |  |  |  |
| 106 310 206 155 Design filing fee 107 480 207 240 Plant filing fee                                       | 20 300 220 150 Filing a brief in supp                       |  |  |  |  |  |
| 108 760 208 380 Reissue filing fee   | 21 260 221 130 Request for oral he                          | <del></del>                                    |  |  |  |  |
| 114 150 214 75 Provisional filing fee  | 30 1,310 130 1,310  | a public use proceeding                        |  |  |  |  |
|  | 40 110 240 55 Petition to revive -                          |  |  |  |  |  |
| SUBTOTAL (1) (\$) 740.00   | 41 1,210 241 605 Petition to revive -                       |  |  |  |  |  |
| 2. EXTRA CLAIM FEES  | 42 1,210 242 605 Utility issue fee (or                      | reissue)                                       |  |  |  |  |
| Ext <u>ra Claims below Fee Paid</u>  | 43 430 243 215 Design issue fee                             |  |  |  |  |  |
| Total Claims 37 -20** = 17 x 18 = 306.   | 44 000 244 200  | mmissioner                                     |  |  |  |  |
| Independent 8 - 3** = 5 × 84 = 420.  |   |  |  |  |  |  |
| Multiple Dependent   |   | provisional applications                       |  |  |  |  |
| **or number previously paid, if greater, For Reissues, see below<br>Large Entity Small Entity            |   | rmation Disclosure Stmt                        |  |  |  |  |
| Fee Fee Fee Fee Description  | 81 40 581 40 Recording each pa                              | atent assignment per mber of properties) 40.00 |  |  |  |  |
| Code (\$) Code (\$)  103 18 203 9 Claims in excess of 20   |   | n after final rejection                        |  |  |  |  |
| 100 10 200 0 1111111   | (37 CFR § 1.129(a   | 1))  |  |  |  |  |
| 102 78 202 39 Independent claims in excess of 3<br>104 260 204 130 Multiple dependent claim, if not paid | 49 760 249 380 For each additiona examined (37 CFR          |  |  |  |  |  |
| 109 78 209 39 ** Reissue independent claims  | examined (37 CFR  | 325(0)/  |  |  |  |  |
| over original patent   | her fee (specify)   |  |  |  |  |  |
| 110 18 210 9 ** Reissue claims in excess of 20 and over original patent                                  | her fee (specify)   |  |  |  |  |  |
| SUBTOTAL (2) (\$) 726.00   | leduced by Basic Filing Fee Paid St                         | UBTOTAL (3) (\$) 40.00                         |  |  |  |  |
| SUBMITTED BY Complete (if applicable)  |   |  |  |  |  |  |
| Name (PantiType) Michael A. Glenn Registration No. (Attorney/Agent) 30,176 Telephone 650-474-8400        |   |  |  |  |  |  |
| Signature 7  | TAttomeyragency   | Date 2/7/02                                    |  |  |  |  |

Burden Hour Statement: This form is estimated to take 0.2 hours to complete. Time will vary depending upon the needs of the individual case. Any comments on the amount of time you are required to complete this form should be sent to the Chief Information Officer, Patent and Trademark Office, Washington, DC 20231 DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO Assistant Commissioner for Patents, Washington, DC 20231.